

STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	REQUEST AND ORDER FOR REVIEW OF REFEREE RECOMMENDATION	CASE NO.
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1. In the matter of
(name(s), alias(es), DOB)

REQUEST

2. **I request** that a judge review the referee recommendations in this matter entered on _____ .
Date

3. Grounds for review are as follows:

Signature	Date	Address
Name (type or print)	City, state, and zip	Telephone no.

NOTE: This request must be filed with the court within 7 days of the date of the referee's recommendation as stated in item 2. above.

ORDER

4. **IT IS ORDERED** that the referee's recommendations referred to above are ☐ affirmed. ☐ denied.

☐ stayed pending decision on this review. ☐ modified as follows:

Date	Judge	Bar no.
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Do not write below this line - For court use only